ACEP/EvidenceCare Window

Evolving Description of ACTS Collaborative Participant's COVID-19 Knowledge Ecosystem Efforts

	Identify Studies	Review Evidence
Current Approach	Literature search based on key words. Awareness of studies from participants in the content workgroup	Folks on the committee review the studies and highlight relevant content The relevant content gets collated into shared spreadsheets that organize the content into various COVID topics
Pearls/Tips Learned	None we've been doing it kind of manually!	Shared spreadsheets represent an easy way for folks to collaborate and not have version control issues.
Desired Approach	 To have a curate list of articles to review every few weeks based on keywords and filters Needs to have direct links to PDFs. Otherwise, we still have to do the 2nd half of the work, which is finding the PDF. 	 A 3rd party would review the studies and give us an output that is summarized key points from the study. Key data would be extracted and presented in an easy to digest format (table, etc.)
Needs to Achieve Desired Approach	Check all that apply _X_Better source/input materials [Details: a curated source of primary studies] Common format/terminologies for managing/sharing data [Details:] Other [Details:]	Check all that apply _X_Better source/input materials [Details: A source that had predigested studies, highlighting the key points and data] _X_Common format/terminologies for managing/sharing data [Details: agree!] _X_Consistency of outcomes [Details: Standardization of the way information is organized and shared] _Engagement with primary researchers and upstream stakeholders [Details:] _Engagement with decision makers and other downstream stakeholders [Details:] _Other [Details:]
Support We Can Provide Other Participants	We have clinical experts who can help determine the search terms and filters that will be relevant to our use cases.	 We are consuming the content on the backend, so have ideas on how to best structure the information for sharing with all stakeholders.

	Produce Guidance	Make Guidance Computable
Current Approach	Assemble a panel of experts in Emergency Medicine to review the COVID literature	
	Previously, we were having weekly meetings as we were developing the tool	
	Will be moving to monthly meetings as we move forward with our cadence	
	See here for ACEP/EvidenceCare COVID-19 Severity Classification/Triage /Disposition tool	
Pearls/Tips Learned	Sometimes the hardest part is scheduling meetings.	
	Potentially move to a more asynchronous model of collaboration that doesn't require as many meetings.	
Desired Approach	Desired Approach Seamless collaboration of clinical stakeholders to determine best practice approach in a constantly evolving environment.	
	More asynchronous work processes to optimize efficiency.	

Needs to Achieve Desired Approach	Check all that apply Better source/input materials [Details:]	Check all that apply Better source/input materials [Details:]
	Common format/terminologies for managing/sharing data [Details:] _X_ Other [Details: Better collaboration structure to bring parties together consistently]	Common format/terminologies for managing/sharing data [Details:]Other [Details:]
Support We Can Provide Other Participants	Engagement with ACEP's group of clinical experts	

	Implement Guidance (e.g., as CDS, eCQMs)	Analyze Results (e.g., care outcomes)	Apply Results (e.g., Quality Improvement, create evidence)
Current			
Approach			
Pearls/Tips Learned			
Desired Approach			
Needs to Achieve Desired Approach	Check all that apply Better source/input materials [Details:]	Check all that apply Better source/input materials [Details:]	Check all that apply Better source/input materials [Details:]
	Common format/terminologies for managing/sharing data [Details:]	Common format/terminologies for managing/sharing data [Details:]	Common format/terminologies for managing/sharing data [Details:]
	Other [Details:]	Other [Details:]	Other [Details:]
Support We Can Provide Other Participants			

Stakeholders can place comments at the bottom of any Learning Community page. If you need editing access to these Participant Window pages, please contact support@ahrq-acts.org.

Previous Notes

See here for ACEP/EvidenceCare COVID-19 Severity Classification/Triage/Disposition tool

pertinent study? Development and Validation of the Quick COVID-19 Severity Index: A Prognostic Tool for Early Clinical Decompensation

Current knowledge supply chain processes, including keeping CDS intervention up to date

 ACEP has a blog where more than 4,000 Emergency Physicians participate across the globe to share their experiences. ACEP meets with CDC, CMS, NIH, and FDA on regular basis. Our Clinical Policies Committee and Clinical Practices Committee collect evidence/knowledge and review /approve them on periodic basis.

Enhanced knowledge supply chain processes, including keeping CDS intervention up to date

• (details)